SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS				Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 104 OF 136 (check only one) X 17
						erson for the purpose of soliciting contributions e to solicit contributions from such committee.
\	NAME OF COMMI Friends of Ji	, ,				
4. -	Full Name (Last, First, Middle Initial) ARCHIPAC -THE AMERICAN INSTITUTE OF ARCHITEC Mailing Address 1735 New York Avenue NW					Date of Disbursement O7 14 2015
V	State Vashington DC			Zip Code 20006		Amount of Each Disbursement this Period
_					Category/	Transaction ID : D528416
	Office Sought:	House Senate President District:	Disbursement For: X Primary Other (spinsor)	General	Туре	* In-Kind Received
F 3.	Full Name (Last, First, Middle Initial) National Association for Homecare and Hospice Mailing Address 228 7th Street SE					Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
F	City Washington Purpose of Disburs Facility Rental Candidate Name	e of Disbursement ty Rental			Category/	
	Office Sought:	House Senate President District:	Disbursement For: Primary Other (s	General	Туре	
c.	full Name (Last, First, Middle Initial) NBSC - Columbia Main Mailing Address 1421 Main St				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
((F	State Zip Code Columbia SC 29201-2805 Turpose of Disbursement Bank Fee Candidate Name				Category/ Type	Amount of Each Disbursement this Period 18.00 Transaction ID: D529497
	Office Sought:	House Senate President District:	Disbursement For: Primary Other (s	General		
						0574.05

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....